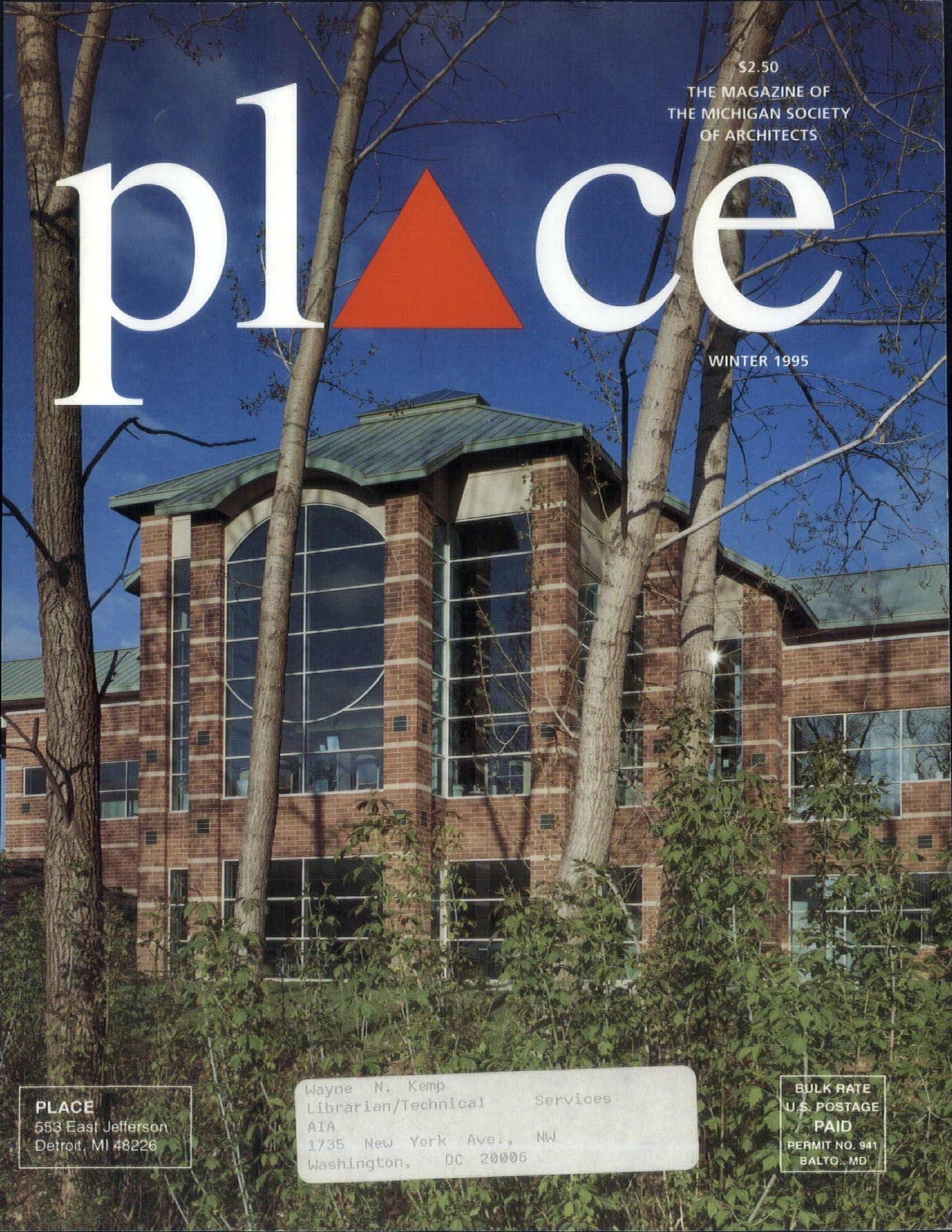

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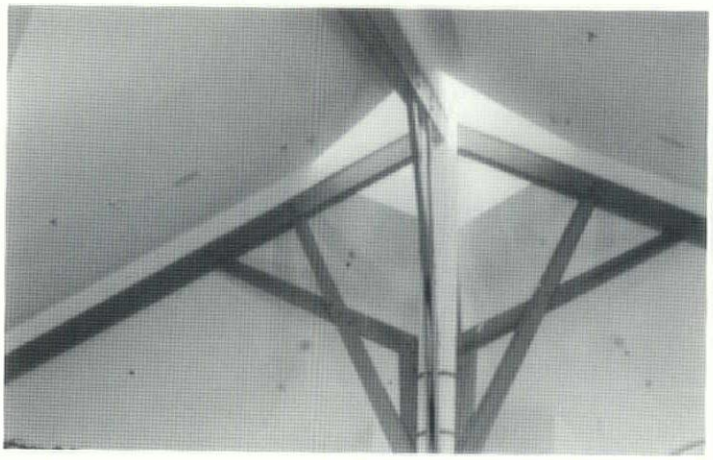

WINTER 1995

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The award winning Lansing Ophthalmology Regional Eye Care Facility
by Eckert/Wordell Architects, P.C.
Photography by Brad Granzou.

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553 East Jefferson, Detroit MI 48226. Editor: Timothy Casai. Please address all letters and inquiries to the above address in care of Rae Dumke.

Healthy Debate

Some years ago, I read of a study of employee satisfaction with their working environment. Initially workers responded negatively to their rather ordinary workplace which had not been given any attention for many years. Improvements to the space were made, such as lighting, furniture and finish upgrades, and the survey was conducted again. Morale and job satisfaction rose significantly. But when some of the workplace improvements were removed and the survey conducted a third time, morale and job satisfaction rose again. This phenomenon was explained in simple terms. While the workplace upgrade was appreciated, it was the attention paid to the people and their problems which had the biggest effect.

Can this theory be translated into a discussion of health care reform? Consider for a moment the attention paid to the health care industry over the past two years. The harsh glare of the media spotlight has pried into every crack in the health care machine. Consider next the changes which have occurred recently in the system; mergers, acquisitions and alliances have been formed, and plans, reorganizations and ideas have been developed. Is the threat of forced change enough to ignite voluntary self-examination, and thereby change?

Some will say that the seeds of the current trends in health care construction were planted years ago; and that the last two years of debate have merely functioned as fertilizer for an already fertile crop. Others will argue that the debate forced providers to reinvent themselves, their service delivery and their facilities. The effect has been a strong trend toward primary care facilities that are patient focused and community based.

We present four projects in this issue of PLACE which have grown out of this trend toward primary care facilities. All have attempted to respond to the changing landscape of medical facility design. These buildings are inviting, welcoming places which seek to break through the old clinical demeanor put forth by so many of our older health care facilities. They are designed with the patient's needs in mind and the community's spirit at heart.

So, whether the change is by evolution or revolution, the effect has been positive on the design of current health care facilities. Let the debate continue. ▼

Place Magazine
Editorial Schedule
1995

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Summer '95 **June 9, 1995**
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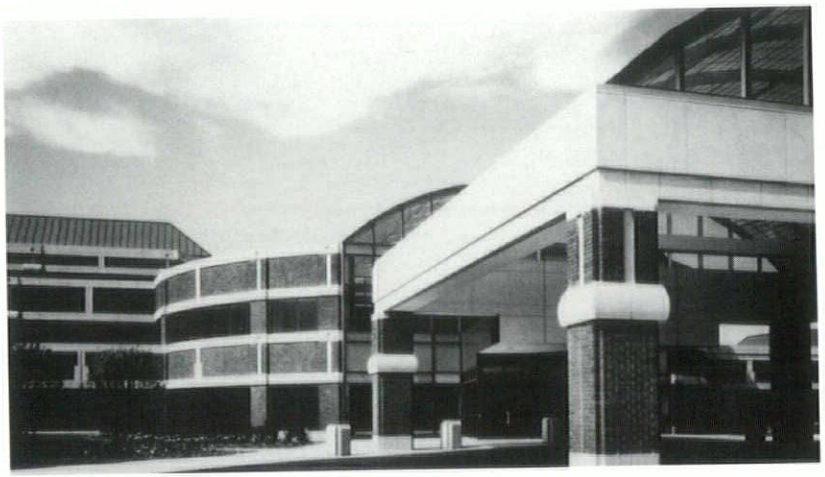
HEALING ARCHITECTURE

When Milwaukee-based Aurora Health Care, Inc. selected Kenosha, Wisconsin as the site for its first free-standing ambulatory care center, the community was ready for the arrival. Since 1990, the area had added thousands of manufacturing jobs and hundreds of homes had been built. The overall population was expected to grow significantly by 1998, yet a shortage of specialists in the areas of internal medicine, family practice and obstetrics was a problem. To make matters worse, many local companies were dissatisfied with the cost of health care, largely attributable to the dependence upon high-cost inpatient care providers.

Aurora selected Albert Kahn Associates, Inc. as the architect-engineer, and a challenge was made: to create a prototype facility design that could be modified to fit sites of varying size and shape and constructed in a modular basis. In response, what Albert Kahn designers brought forth was a design that placed the facility's two major components—a medical office and ambulatory care center—on opposite sides of a lobby "hinge". For future ambulatory care centers, the two areas could be constructed in different orientations to the lobby, thus allowing the basic design to be modified to fit infinitely different parcels of land. **continues**



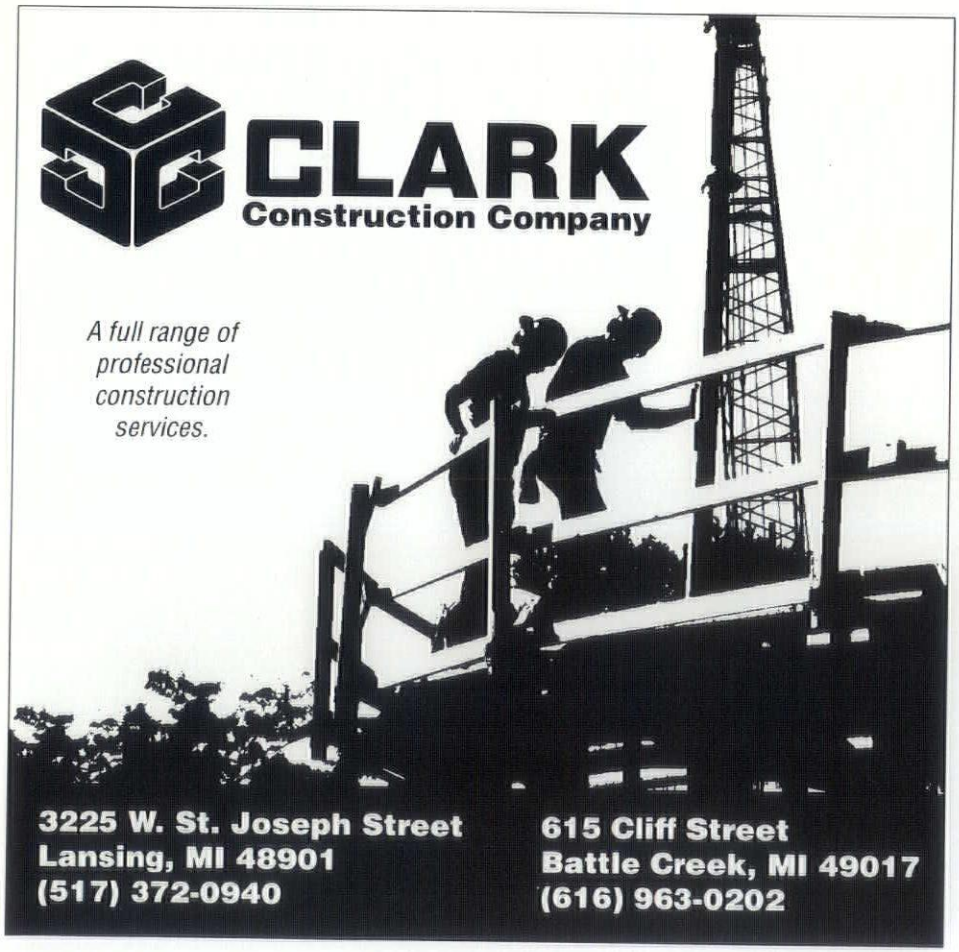
The exterior features traditional red brick and cast stone trim, along with green-tinted glass for a timeless architecture.

The patient canopy provides comfort and convenience for patients and their families in the northern climate.

"Our goal for the design of Aurora Health Center was to create 'healing' architecture," says Alan Cobb, AIA, vice president and assistant chief of architectural design at Albert Kahn. The concept is a comfortable, timeless architecture that projects a permanent image of long-lasting grace and simplicity, Cobb explains. So that patients endure no additional stress, central lobby and major corridors are located along exterior windows to provide good wayfinding. Attention to patient privacy in waiting rooms and dressing areas responds to an absolute need to respect patients' feelings. "Too many medical facilities are designed with only the efficiency of planning in mind—not so with Aurora Health Center," Cobb adds.

With Kenosha's population expected to continue to grow, the facility will no doubt become an increasingly valued member of the community. In fact, the new Aurora Health Center has already dubbed itself as a "friend of the family." It's a friendship designed and built to last. ▼

Project: Aurora Health Center
Location: Kenosha, Wisconsin
Developer: Hammes Company
Architect-Engineer: Albert Kahn Associates, Inc.
Construction Manager: M.A. Mortenson Company
Photography: Eric Oxendorf



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PLANTING SEEDS

Faced with a growing demand for outpatient services including outpatient surgery, this urban medical center formulated an ambitious plan for a full-service satellite Ambulatory Care Center. Located five miles north of the main hospital, the Ambulatory Care Center is viewed as the centerpiece of the Medical Center's ongoing development of their medical office building complex. Along with easing the surgery overload being experienced by the main hospital, the Center will provide pre-admission testing, radiology and laboratory services in a convenient and patient-friendly setting.

The 17,000 square feet Ambulatory Care Center is designed for expansion to 30,000 square feet and has been sited to support the future campus development of additional medical office buildings and/or patient service facilities. The axial alignment of these build-

At night, the porte cochere is a welcoming element.

The exterior features rose colored brick with buff colored accents.

ings, along with the cross axis of the site entry, has been designed to harmoniously fit into the long range master plan for the adjacent 80-acre parcel which will someday accommodate a replacement hospital.

The Ambulatory Care Center "first phase" has been functionally planned around the following service zones:

- Public Waiting
- Radiology
- Laboratory
- Surgery
- Recovery
- Support Functions

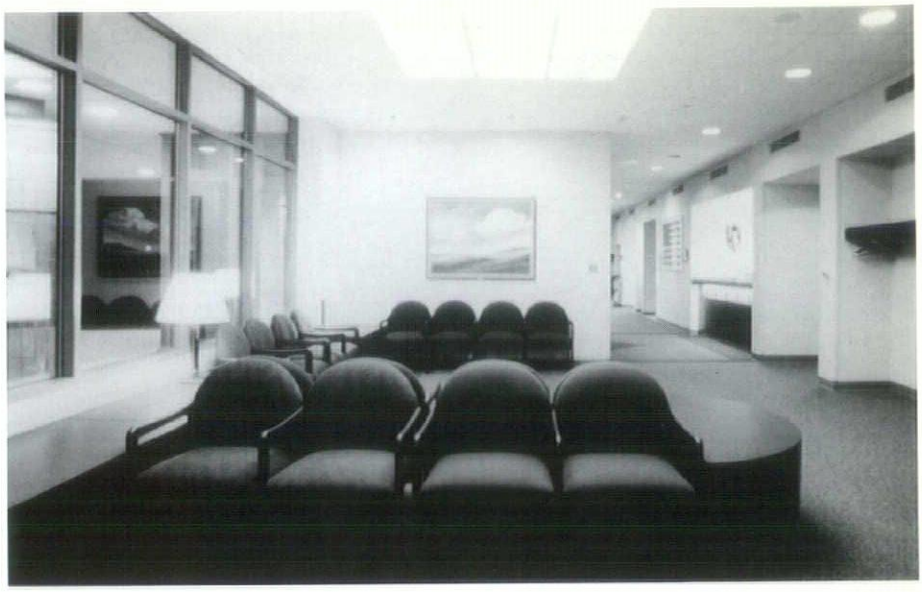
This zoning of the plan maximizes staff efficiency and simplifies patient flow while allowing for future expansion of each zone as need arises.

The exterior design of the one-story, steel framed building features a green colored, standing seam metal roof which is easily visible from the nearby expressway and provides a unique non-institutional identity for the facility, appropriate to the suburban retail context of the site. This roof incorporates a porte cochere which terminates in a small outdoor pavilion space which will be furnished to expand public waiting options during warm weather.

The interior design scheme of the building is intended to evoke a residential feel, helping patients to feel comfortable. A predominant theme of teal green and mahogany wood exists throughout the facility, tying all areas together. Jewel tones of vibrant blue, green and burgundy were used as accent colors in the patient waiting area and recovery rooms, providing a stimulating, yet soothing environment. In the mammography area, colors are intentionally soft and calming. ▼

See next page for project credits.

Work areas are crisp and simple with consistent color accents.



Patient waiting areas are modern and cheerful.

St. Mary's Ambulatory Care Facility

Architect and Engineer: Giffels Hoyem Basso, Inc.
Landscape Architect: Grissim Metz Associates
Civil Engineer: Spicer Engineering, Inc.
Structural Engineer: W.W.Y. Engineering
Photography: Christopher Lark
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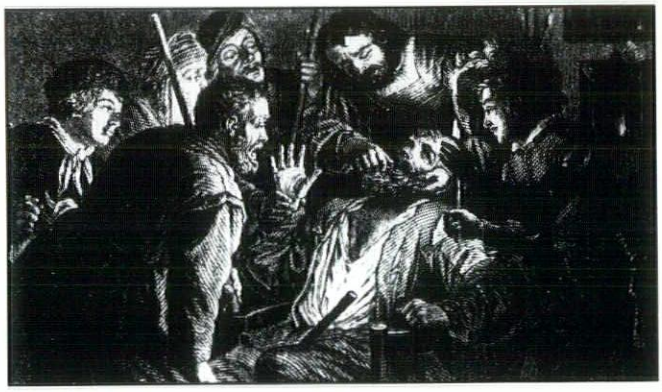

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Firms interested in interviewing with MSHDA to provide design review services shall submit resumes to the Michigan State Housing Development Authority, 401 South Washington Square, P.O. Box 30044, Lansing, Michigan, 48909 by April 30, 1995.

Resumes shall include 1) the firm's experience in the discipline of the design of mulit-family rental housing; and 2) the firm's previous experience in reviewing plans and specifications for multi-family housing.

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e. representative construction types (wood frame, masonry, etc.);

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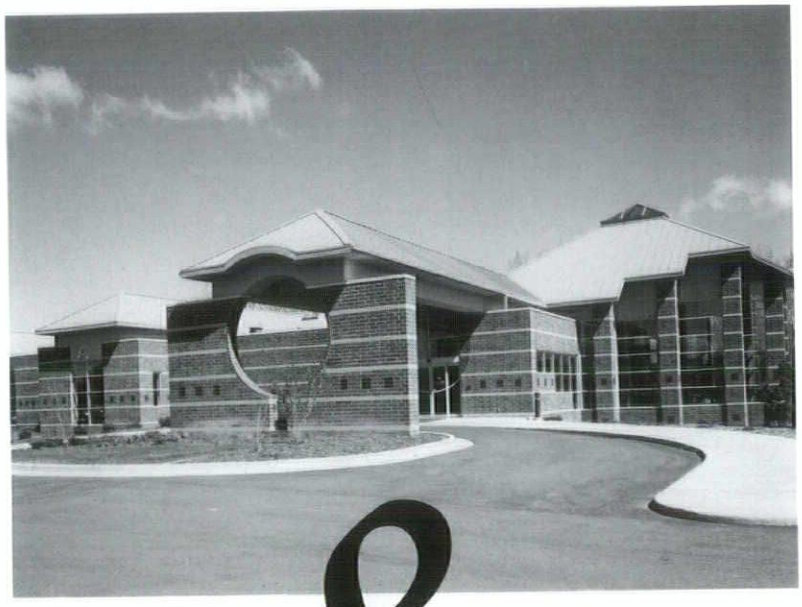
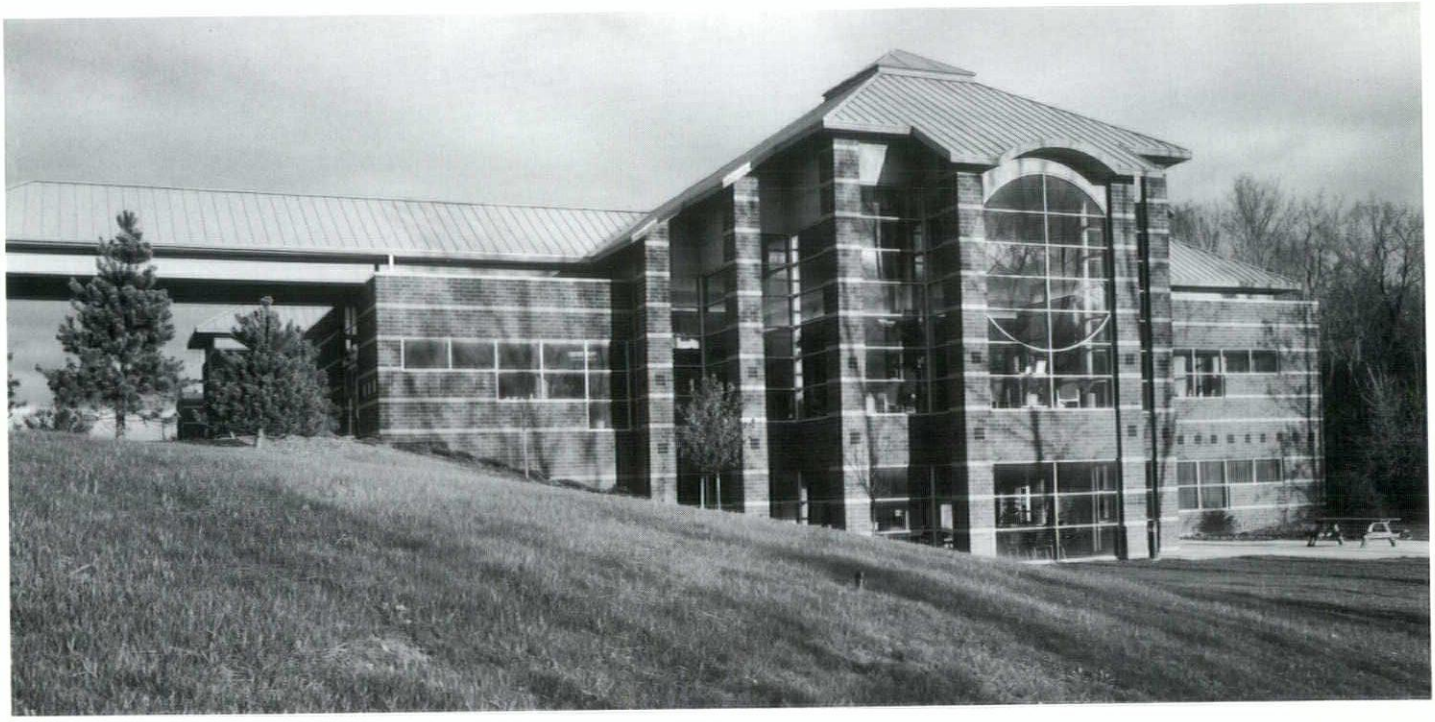


Horizontal banding and prominent roof forms are signature design elements.

VISION & LIGHT

by John Hopkins



The lobby form is reference to an "outcrop" which dominates the east facade.

Lansing Ophthalmology P.C. had a clear vision for its future. It wanted to establish itself as the premier regional ophthalmological center in the mid-Michigan area: a center of excellence, with a team of medical specialists and the latest technology, offering complete services from routine eye exams to diagnosing eye diseases to performing laser surgery, including 24 hour eye emergency treatment.

Operating four offices in three scattered locations, however, was inefficient. This, combined with the inadequacies of the existing facilities, and significant duplication of services, called for a change. Also, there was a lack of a coherent image and visibility.

People value their sight highly. Although a routine eye exam should not be intimidating, many patients are nervous about the outcome of a visit. Placing patients at ease by providing a comfortable, pleasant, supporting environment was a priority. What was needed was a new facility that would create a carefully crafted, coherent, distinctive image. This image must be demonstrated throughout the structure, emphasizing professionalism and denoting care for patients' welfare. Furthermore, a professional, substantive, well-crafted building would reinforce patients' confidence in the quality of their medical treatment.

Lansing Ophthalmology conducted a national search and found the right experience and understanding in Eckert/Wordell Architects of nearby Kalamazoo. Knowing the professional guidance architects would provide in the evaluation and selection of a site, as well as in the development of a building program, Lansing Ophthalmology hired Eckert/Wordell Architects to provide these services as part of the whole design process.

The new facility demonstrates the wisdom of this. The building's distinctive forms have high visibility from the interstate that adjoins the site. It is a beautiful 12 acres, half of which is a protected wooded wetland, with the remainder an open meadow. By carefully placing the building, the architects have achieved a sympathetic relationship between the architecture and the natural terrain and woods.

On approach, the building is first glimpsed obliquely through the trees. The reception area with its pyramidal roof and the distinctive porte-cochere with their circular "eye" imagery predominate. Nearer, the road turns so that one's final approach is axial with the porte-cochere ocular framing the entry door and its repeated circular mullion pattern.

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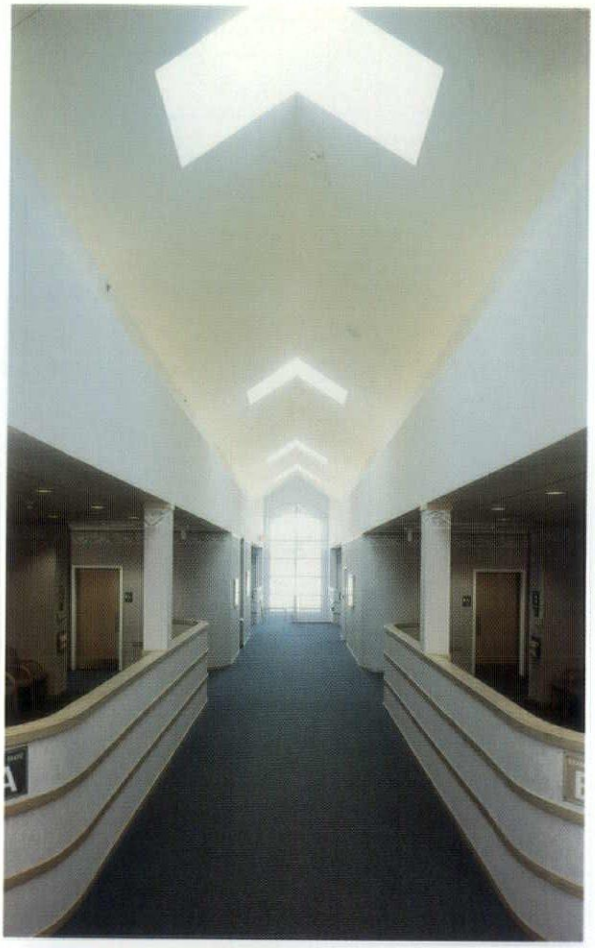
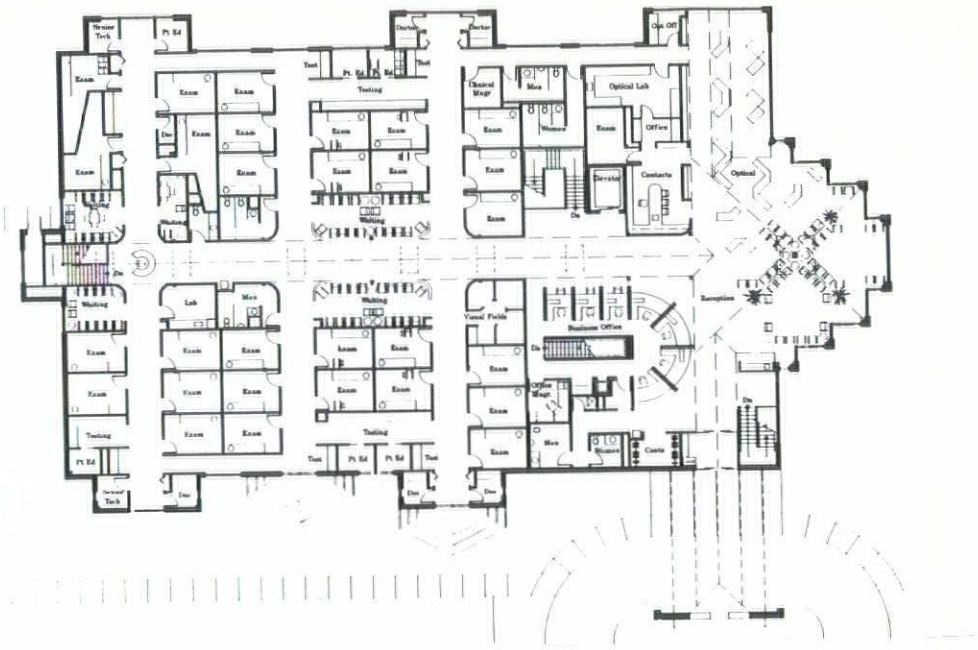


Inside, all "streets" terminate in light and views.

The "tree" anchors the patient lobby and is symbolic of the natural setting.



Upon entry is the semi-circular reception desk immediately on the left, with a generous soaring waiting space adjacent. Tall windows on three sides provide spectacular views of the woodlands and, with the help of a central skylight, flood the space with light. A central column "tree" visually dominates the space. One almost feels out-of-doors—a part of the natural setting. The serenity and peacefulness of this space is a pleasant welcome. The woodland views are also maximized by the design of the form, fenestration and cross section of the building. On the main level there are no dead end corridors; every corridor and most rooms that do not require darkness have both view and light.

The "tree" not only marks the center and axial disposition of the waiting space, but is also the terminator of the axis that organizes the whole building. Along this main east-west vaulted and skylighted circulation spine are six small scaled pods. Each consists of 5 examination rooms and shared service spaces. Clustered along the spine are the waiting areas. Easy to locate and well placed to serve each pod they each have views of the constant activity of the "main street" circulation. Both patients and staff find this hierarchical idea of circulation, with it's "main street," "side streets" and interconnecting "alleys," to be clear, functional and efficient. The clarity of this organizational concept is further expressed on the exterior through the massing of the roofs. Other spaces on the main level include offices, a lab and a retail optical shop.

The elevator and main stair to the lower level are conveniently located along the central spine. The lower level houses two additional examination pods, minor surgery, files, offices, staff lounge and other staff service areas. The sloping site and subgrade terracing are taken advantage of here, giving full facade exposure to much of this level.

The facility manifests architectural care and community concern in a building type so often reduced to the lowest common denominator of speculative banality. The architects have clearly and successfully devoted much consideration to the integration of the building with its site. Further, themes of earth and landscape are particularly evident. For example, brickwork does not just remind us of permanence or conjure up civic and community images, but is of the earth. The earth-colored brickwork with repeating horizontal banding also contains subtle glazed accent brick reminiscent of fossils embedded in exposed horizontal strata. The fractured plan and roofline of the "outcrop" form of the main reception area is a further geomorphic reference. Also, the long hipped roofs make visual allusions to the Prairie style regional architectural tradition as well as to the more abstract topographic forms of the site.

When visiting Lansing Ophthalmology P.C., one immediately feels flooded with light. Many benefits flow from the architects attention to natural lighting and views. The interior presents a cheery, generous and open setting. Both patients and staff maintain visual contact with the real world and so are aware of the passing of time and subtle changes in outside light. Also, orientation is reinforced by extra daylight given to the major circulation spine.

The knockout punch of the dichotomies of light and dark, of earth and sky, comes when these ideas unite in the central "tree" structure of the reception area, from which the whole formal structure of the building emanates. Surrounded by expansive horizontal views to the nature it idealizes and capped by a pyramidal roof and central skylight that symbolizes the vertical connection to the sky stands the abstracted tree form, firmly rooted in the earth—reaching toward the light. Finally how fitting that the optimism of the life-giving presence of light, be such a strong symbolic force in this building. Actually, vision is most centrally about light. ▼

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HEART & SOUL

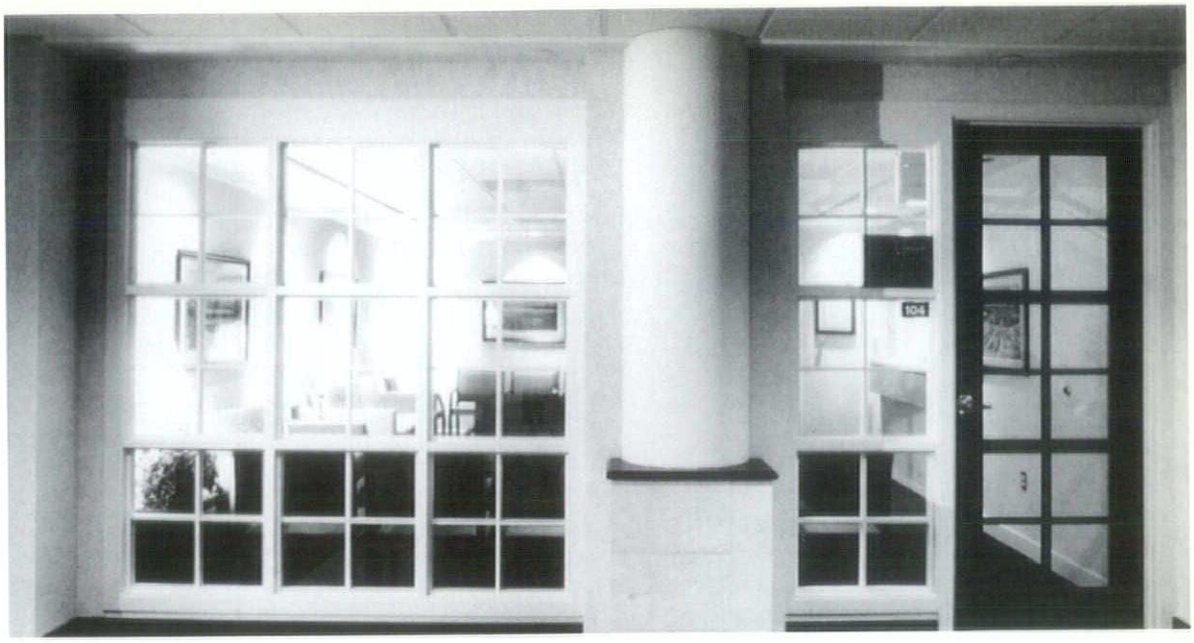
The solid exterior features a skylight canopy and lobby.

Seeking to improve the quality of service for their patients, several groups of prominent heart specialists have joined together to form the Michigan Heart & Vascular Institute. Their practices are now housed in a new 85,000 square foot facility located on the campus of St. Joseph Mercy Hospital, in Ypsilanti, Michigan.

Designed by Jickling Lyman and Powell Associates of Troy, the new Michigan Heart & Vascular Institute Medical Center is one of the few facilities in the nation that offers comprehensive outpatient cardiovascular care. Within the

continues

The two-story entrance lobby is flooded with natural light from above.



Creative detailing brings a warming sense of scale to the institute's important spaces.

facility, physicians and staff provide a complete continuum of care ranging from evaluation to diagnosis, treatment and rehabilitation.

The MHVI Medical Center houses the most advanced technology, but has been designed to maximize the comfort and convenience of patients and families. The facility permits emphasis on high quality care delivered in a cost-efficient, outpatient setting.

The new two-story building contains four physician group practices, a cardiac rehabilitation program, non-invasive vascular and cardiac testing areas, a cardiac catheterization laboratory and recovery center, an education center and clinical research space.

Completed in 1994, the building design focuses on an interior environment which is articulate as well as pleasing. Subtle attention to detail creates interesting yet patient oriented space. It is indeed a welcome addition to the "heart" of the St. Joseph Mercy campus. ▼

Project: Michigan Heart & Vascular Institute, St. Joseph Mercy Hospital Campus
Architect: Jickling Lyman Powell Associates Inc.
Interior Designer: JNV Associates, Inc.
Mechanical/Electrical Engineers: Peter Basso Associates, Inc.
Structural Engineering: Cummins & Barnard, Inc.
Contractor: O'Neal Construction, Inc.
Photographer: Stephen Graham Photography

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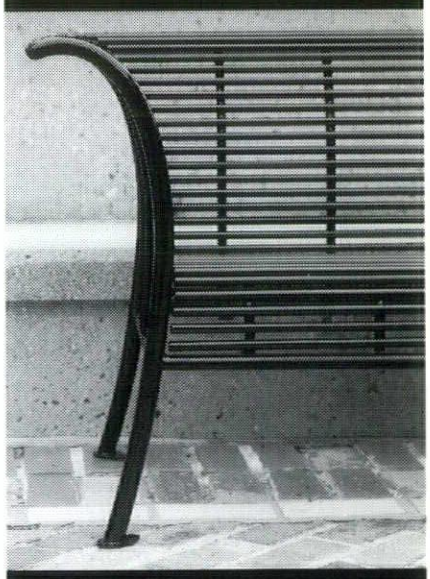
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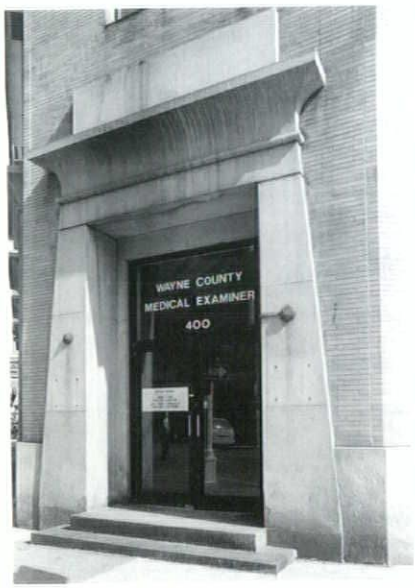

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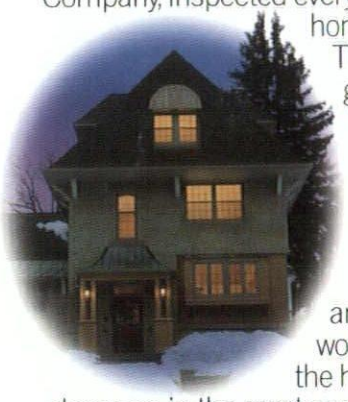
Representatives from the Marvin dealer and distributor, together with the architect and Nick Smaby of Choice Wood Company, inspected every opening in the home one by one. Then the entire group sat down and planned the job out. They asked specific questions about which sizes, styles, shapes and features, would best reflect the home's original elegance, in the most energy-efficient and maintenance-free manner possible, all within the required budget.



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